

Assessment Report

Fakultas Dakwah dan Komunikasi

Assessment dates	30/01/2020 to 30/01/2020 (Please refer to Appendix for details)
Assessment Location(s)	Palembang (000)
Report Author	Hopiffuddin Hopiffuddin
Assessment Standard(s)	ISO 9001:2015



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Executive Summary

This audit objective is extension to scope, covering three other programs in the faculty. Generally, the quality management system state is relatively similar with the existing scope. No new activity is recorded.

In line with the stated strategic direction and intended results of the university's quality management system, particularly with regard to achieve organization objective as noted in quality objectives, the management system has demonstrated that it is largely designed to support the strategic direction and deliver the intended results.

There are however further possible opportunities to improve relating to achieving the intended results.

Changes in the organization since last assessment

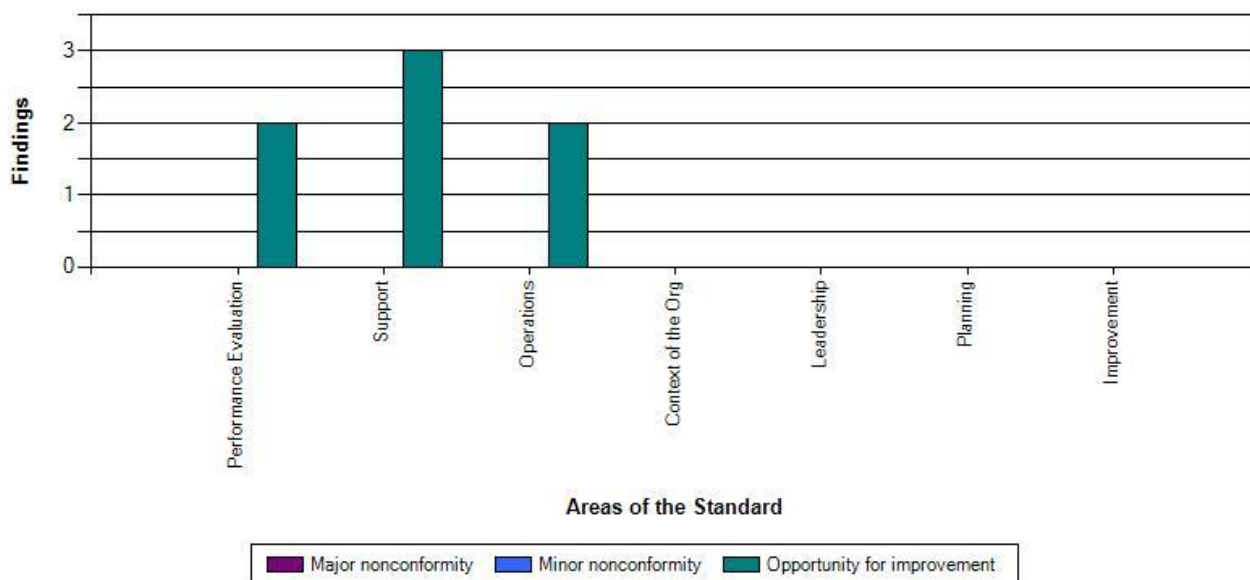
There is no significant change of the organization structure and key personnel involved in the audited management system.

No change in relation to the audited organization's activities, products or services covered by the scope of certification was identified.

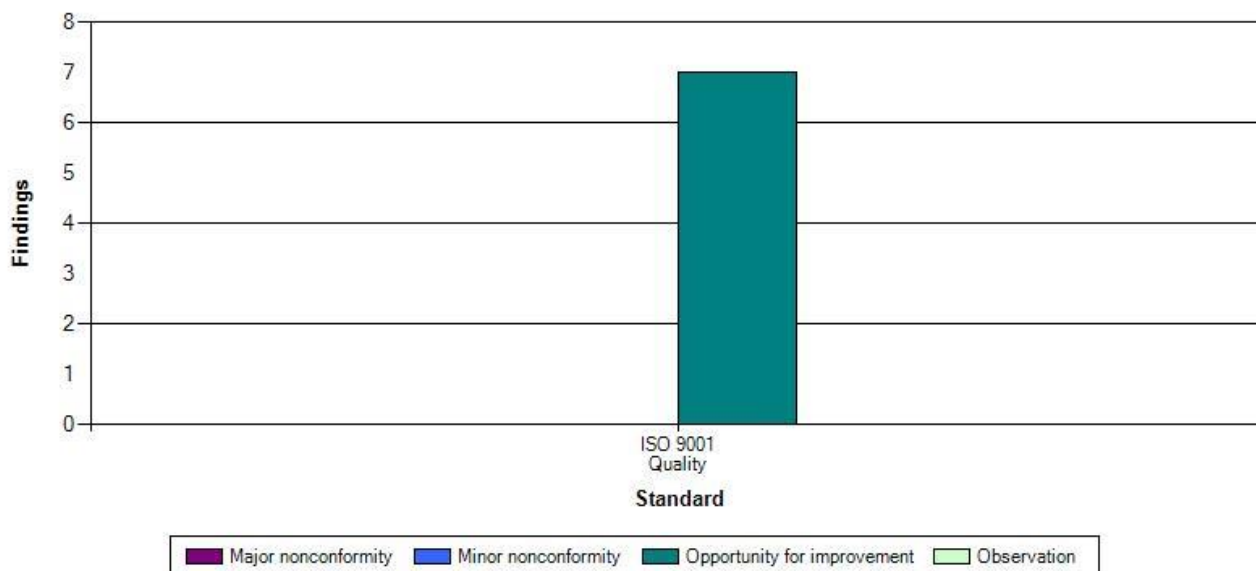
There was no change to the reference or normative documents which is related to the scope of certification.

NCR summary graphs

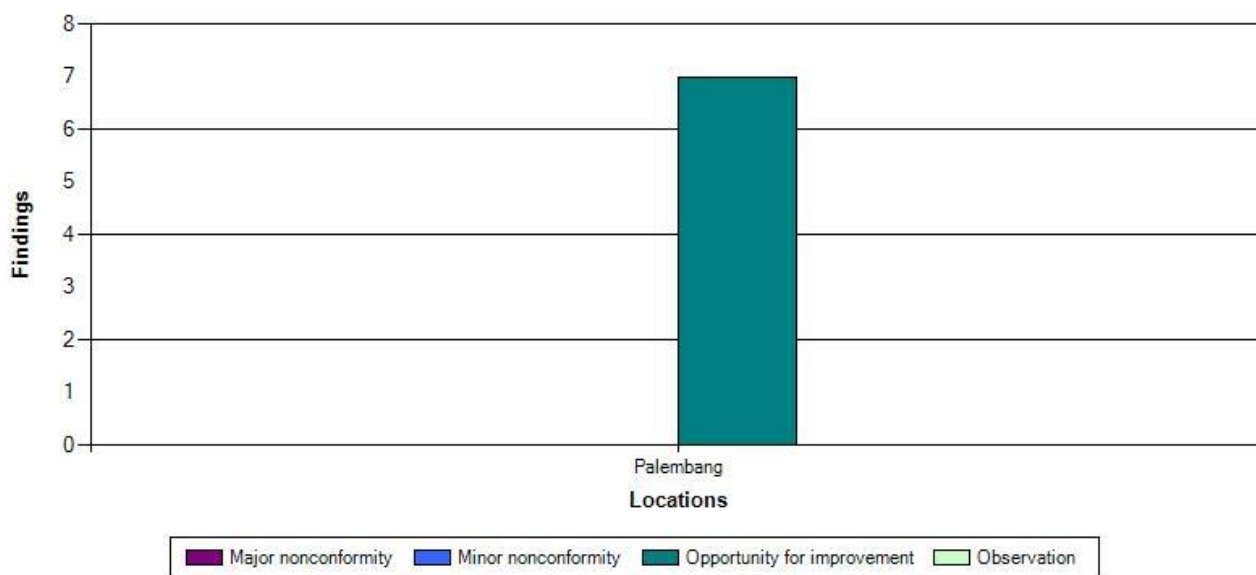
Areas of the standard(s) where BSI recorded findings



Which standard(s) BSI recorded findings against



Where BSI recorded findings



Your next steps

NCR close out process

Corrective actions with respect to nonconformities raised at the last assessment have been reviewed and found to be effectively implemented.

No new nonconformities were identified during the assessment. Enhanced detail relating to the overall assessment findings is contained within subsequent sections of the report.

Please refer to Assessment Conclusion and Recommendation section for the required submission and the defined timeline.

Assessment objective, scope and criteria

The objective of the assessment was to conduct a surveillance assessment and look for positive evidence to ensure that elements of the scope of certification and the requirements of the management standard are effectively addressed by the organisation's management system and that the system is demonstrating the ability to support the achievement of statutory, regulatory and contractual requirements and the organisation's specified objectives, as applicable with regard to the scope of the management standard, and to confirm the on-going achievement and applicability of the forward strategic plan and where applicable to identify potential areas for improvement of the management system.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

ISO 9001:2015

Fakultas Dakwah dan Komunikasi UIN Raden Fatah Palembang management system documentation

Assessment Participants

Name	Position	Opening Meeting	Closing Meeting	Interviewed(processes)
Pls See The Attn List		X	X	X

Assessment conclusion

BSI assessment team

Name	Position
Muhammad Ikhsan	Team Leader
Hopiffuddin Hopiffuddin	Team Member

Assessment conclusion and recommendation

The audit objectives have been achieved and the certificate scope remains appropriate. The audit team concludes based on the results of this audit that the organization does fulfil the standards and audit criteria identified within the audit report and it is deemed that the management system continues to achieve its intended outcomes.

RECOMMENDED - The audited organization can be recommended for certification / recertification / continued certification to the above listed standards, and has been found in general compliance with the audit criteria as stated in the above-mentioned audit plan.

Use of certification documents, mark / logo or report

The use of the BSI certification documents and mark / logo is effectively controlled.

Findings from previous assessments

Finding Reference	1731815-201901-N1	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	9.1.3
Category	Minor		
Area/Process:	<p>Auditee : Mrs. Hamida Clauses : 4.1-10.1</p> <p>4.1 Understanding the organization and its context; Has stated on the manual Sistem Manajemen Mutu Code QA UIN - SPMI-MM-02 rev. 03, issued : 01 August 2017</p> <ul style="list-style-type: none"> - Internal and external issues relevant to organization (internal : values, culture, knowledge and performance, external : - legal, technological, competitive, cultural, social and economic environments), their needs and expectations and considered the impact of any changes to the issues when conducted monitoring and review. - SWOT analysis : strength, Weakness, Opportunity and Threat - Visi dan Misi Fakultas <p>4.2 Understanding the needs and expectations of interested parties. Has stated on the manual Sistem Manajemen Mutu Code QA UIN - SPMI-MM-02 rev. 03, issued : 01 August 2017 Kebutuhan dan Harapan :</p> <ul style="list-style-type: none"> - Bantuan Tutorial yang bersifat akademik dan pengembangan soft skill - Informasi dan Bimbingan Karir - Konseling Pribadi dan Sosial - Layanan Kesehatan - Layanan Beasiswa <p>4.3 Determining the scope of the quality management system; 4.4 Quality management system and its processes</p> <ul style="list-style-type: none"> - No change on manual mutu - Organization chart <p>5.1 Leadership and commitment 5.1.1 General Top management shall demonstrate leadership and commitment with respect to the quality management system.</p> <ul style="list-style-type: none"> - Permen Agama RI No. 53 Tahun 2015 - Has stated on the manual Mutu Sistem Manajemen Mutu Code QA UIN - SPMI-MM-02 rev. 03, issued : 01 August 2017, chapter 5.2.1 <p>5.2 Policy; - Has stated on the manual Mutu Sistem Manajemen Mutu Code QA UIN</p> <ul style="list-style-type: none"> - SPMI-MM-02 rev. 03, issued : 01 August 2017, chapter 5.2.1 <p>5.2.2 Communicating the quality policy The quality policy has</p>		

	<p>communicated, understood and applied within the organization (NC)</p> <p>6.1 Actions to address risks and opportunities</p> <ul style="list-style-type: none"> - Analysis of risk and opportunities: risk/opportunity aspect; - requirement parameter; - learning objective; - probability and consequence; - risk category; - anticipation and program <p>6.2 Quality objectives and planning to achieve them</p> <ul style="list-style-type: none"> - Has stated on the manual Mutu Sistem Manajemen Mutu Code QA UIN-SPMI-MM-02 rev. 03, issued : 01 August 2017, chapter 6.2 - SM-FDK UIN rev.01, issued 01 April 2016. <p>6.3 Planning of changes / 8.5.6 Control of change During planning of changes & control of change.</p> <ul style="list-style-type: none"> -Prosedur pengendalian dokumen dan rekaman -Meeting -Memo <p>7.5 Documented information - Procedure "Control of documents" no. UIN-QA/PM/01/01 rev. 0</p> <ul style="list-style-type: none"> - Procedure "Control of Record no, UIN-QA/PM/01/02 rev. 0 - Formulir Daftar Catatan Mutu <p>7.1 Resources Date verified :</p> <ul style="list-style-type: none"> - Library Facility - Laboratory Facility <p>7.1.2 People Date verified :</p> <ul style="list-style-type: none"> - Seen on the Organization Structure updated as per January 03, 2018 <p>7.1.3 Infrastructure Date verified :</p> <ul style="list-style-type: none"> - Daftar Barang Ruangan No. 09 Ruangan Prodi KPI, Kode UPB 150 4-4 001, Issued January 2018 <p>7.1.4 Environment for the operation of processes The organization shall determine, provide and maintain the environment necessary for the operation of its processes and to achieve conformity of products and services.</p> <ul style="list-style-type: none"> - Cleaning service - Monitoring and evaluation handle by rektorat (Bagian Umum) <p>7.1.5 Monitoring and measuring resources</p> <p>7.1.5.2 Measurement traceability</p> <ul style="list-style-type: none"> - Tracer Study <p>7.1.6 Organizational knowledge Organization established SOP Knowledge Management, Some reference used by organization for providing their service such as manual book of Manual Mutu & Rencana Strategis.</p>
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	<p>Objective evidence</p> <ul style="list-style-type: none"> - Manual Mutu <p>7.2 Competence Analisa kompetensi pada semua jabatan.</p> <ul style="list-style-type: none"> - Statuta Universitas Islam Negeri Raden Fatah Palembang Permen Agama RI No. 62 Tahun 2015 <p>7.3 Awareness</p> <p>7.4 Communication Awareness and communication are done by Meeting and memo External communication : Communication to customer.</p> <p>7.5 Documented information Refer to Standard operational procedures Pengendalian dokumen dan rekaman</p> <p>Objective evidence :</p> <ul style="list-style-type: none"> -Master list document -Distribution record <p>8.1 Operational planning and control / 8.5.1 Control of production and service provision / 8.5.4 Preservation / 8.5.5 Post-delivery activities / 8.6 Release of products and services / 8.7 Control of nonconforming outputs / 8.5.2 Identification and traceability Data verified:</p> <p>8.5.1.Control of production and service provision Procedure have been established such as TUPOKSI</p> <p>8.5.2.Identification and traceability Identification and traceability to Product</p> <p>8.5.3.Property belonging to customers or external providers</p> <p>8.5.4.Preservation /</p> <p>8.5.5 Post-delivery activities Procedure has been established Procedure have been established</p> <p>8.6 Release of products and services</p> <p>8.7 Control of nonconforming outputs Procedure have been established by SK Rektor.</p> <p>9.1 Monitoring, measurement, analysis and evaluation Data verified:</p> <ul style="list-style-type: none"> - Quality Objective - Analysis on customer satisfaction survey : Has Conducted on April 2017 and 2018 <p>9.2 Internal audit program</p> <p>Internal Audit has conducted on 21 August 2018, Audit Criteria base on Standard 1-7 BAN PT</p> <p>Auditor :</p> <ul style="list-style-type: none"> - Mrs. Mardiyah Astuti - Mrs. Mismiwati <p>Auditee : Mrs. Muslimin</p>
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	<p>Describe of IA : 15 NC & 10 OFI</p> <p>9.3 Management review Management review based on standard ISO 9001:2015 has been done date every month, sample last of November 2018.</p> <ul style="list-style-type: none"> - Laporan Tinjauan Management - Attendance list date - Notulen Management Review <p>10. Improvement Organization has established :</p> <ul style="list-style-type: none"> - BAN PT Audit assessment - Monev result of GPMF <p>Result :</p> <p>In general processes in this department were well controlled and properly maintain, Document of Manual Mutu, Kebijakan Mutu, Risk and Opportunities, Need and Expectations of Interested parties, Sertifikat Akreditasi BAN-PT Grade "B", has shown well during audit, However there is one NC minor that need action to improvement related to monitoring and evaluation documented information,</p>
Details:	Pedoman Monev Tridarma sudah ditetapkan, akan tetapi tidak terdapat bukti kegiatan MONEV yang sudah dilaksanakan untuk tahun 2018 dapat ditunjukkan selama audit berlangsung
Objective Evidence:	Monitoring and Evaluation Documented Information
Cause	
sistem belum dipahami oleh personel GPMF	
Correction/containment	
melakukan sosialisasi	
Corrective action	
GPMF akan melakukan monev sesuai petunjuk yang ada di pedoman	
Closed?:	
Yes	

Finding Reference	1731815-201901-N2	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	6.3
Category	Minor		
Area/Process:	Prodi Komunikasi Penyiaran Islam		
Details:	<p>Organisasi belum menetapkan metode perubahan yang efektif, terkait penjabaran terhadap TUPOKSI yang belum diselesaikan terkait dengan pergantian Ka. Prodi yang melakukan/melanjutkan jenjang pendidikan dan meninggalkan jabatan terdahulunya, penugasan sementara Ka. Prodi pengganti tidak diikuti dengan penugasan yang belum</p>		

	terselesaikan, seperti : melakukan evaluasi terhadap dosen LB, Mengevaluasi kegiatan KBM yang belum terselesaikan, mengkomunikasikan Kebijakan Mutu, serta pencarian record (hasil evaluasi dosen LB) yang tidak teridentifikasi dengan baik.
Objective Evidence:	Observasi dan Wawancara terkait penugasan yang belum terselesaikan, seperti : melakukan evaluasi terhadap dosen LB, Mengevaluasi kegiatan KBM yang belum terselesaikan, mengkomunikasikan Kebijakan Mutu, serta pencarian record (hasil evaluasi dosen LB) yang tidak teridentifikasi dengan baik.
Cause	
belum ditetapkan metode perubahan	
Correction/containment	
membuat metode perubahan	
Corrective action	
melakukan atau menetapkan metode perubahan agar tata kelola berjalan efektif	
Closed?:	
Yes	

Finding Reference	1731815-201901-N3	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	8.4.3
Category	Minor		
Area/Process:	Kepegawaian, sarana, prasarana		
Details:	Pengajuan kebutuhan ATK yang diajukan sudah mengacu kepada Kebutuhan sarpras pertanggal 18 January 2019, dan hasil stock opname sedang dilaksanakan catatan stock dan pencatatan penggunaan terhadap ATK tersebut.		
Objective Evidence:	Stock opname report and the record of log book using of Stationary		
Cause			
Penggunaan SLIM belum maksimal			
Correction/containment			
SLIM akan dimaksimalkan			
Corrective action			
Melakukan pengecekan secara berkala tentang kondisi buku			
Closed?:			
Yes			

Finding Reference	1731815-201901-N4	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	8.5.4
Category	Minor		
Area / Process:	Library Activity		
Details:	Ditemukan bahwa penetapan lokasi penyimpanan buku di perpustakaan tidak berjalan dengan efektif, contoh : buku Ajaran Tashawuf dan thariqot dan studi keislaman lokasi 2X3 tidak ditemukan dilokasi dan tidak terdapat pencatatan buku tersebut telah dipinjam. dan penggunaan Aplikasi SLIM tidak berjalan dengan baik, masih terdapat banyak buku yang belum dilakukan pendaftaran dan scan barcode		
Objective Evidence:	Slim e-library and racking identification barcode scanner		
Cause			
Penggunaan SLIM belum maksimal			
Correction/containment			
SLIM akan dimaksimalkan			
Corrective action			
Melakukan pengecekan secara berkala tentang kondisi buku			
Closed?:			
Yes			

Finding Reference	1788359-201906-N1	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	8.5.1
Category	Minor		
Area/Process:	Program Studi Pengembangan Masyarakat Islam		
Details:	Ditemukan bahwa bukti proses pembelajaran Bimbingan Penyuluhan Sosial Semester Ganjil 2017/2018 tidak tersedia		
Objective Evidence:	Laporan Bimbingan Penyuluhan Sosial Semester Ganjil 2017/2018, interview with auditee		
Cause			
Berkas tersebut tersimpan di bagian akademik, ketika ada renopasi dan pemindahan berkas oleh bagian umum akademik, berkas tersebut tercampur pada berkas tahun ajaran 2016/2017.			
Correction/containment			
Memperbaiki sistem pengarsipan dan berusaha mengumpulkan berkas dari dosen dengan sistem 1 pintuh yaitu prodi			

Corrective action
Melakukan koordinasi bersama aiti untuk membuat program penyimpanan berkas dalam bentuk sop copy. Serta dapat dilihat atau diakses kapanpun dan dimanapun, serta pengamanan dari pihak asing.
Closed?:
Yes

Finding Reference	1788359-201906-N2	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	9.1.3
Category	Minor		
Area/Process:	Program Studi Pengembangan Masyarakat Islam		
Details:	Ditemukan bahwa Monev tidak diterapkan pada dosen dengan status LB		
Objective Evidence:	Laporan Monev, interview with auditee		
Cause	Monev dosen LB dilakukan bersamaan dengana dosen prodi, dosen tetap prodi, dan ketua, sekretaris prodi, belum terpisahkan berdasarkan status.		
Correction/containment	Akan memiliki akun tersebut untuk dosen LB, dibantu ketua Kelas memonitoring manual yang dilaporkan per 1 minggu ke prodi		
Corrective action	Mengadakan rapat dan melakukan sosialisasi monev dosen LB, serta menjatukan sanksi jika tidak menaati peraturan yang ada di prodi PMI. Baik sanksi ringan atau tidak diikutsertakan lagi dalam proses belajar mengajar		
Closed?:			
Yes			

Finding Reference	1788359-201906-N3	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	8.5.2
Category	Minor		
Area/Process:	Laboratorium & Perpustakaan		
Details:	Pengecekan stok (stok opname) untuk mengetahui kelengkapan dan kondisi koleksi-koleksi buku perpustakaan belum dilakukan		
Objective Evidence:	Library visit, interview with auditee		

Cause
Slim baru di fungsikan perpustakaan fakultas dakwah, sehingga belum terlaksana stok opname
Correction/containment
menjadwalkan dan melaksanakan stok opname pertama
Corrective action
menjadwalkan stok opname secara rutin untuk mengetahui kelengkapan dan kondisi koleksi buku
Closed?:
Yes

Findings from this assessment

Dekan & Wakil Dekan (Top Management):

Auditee: Pak Kusnadi

Clause: 4,5,6

Objective Evidence:

The Top Management has demonstrated a strong commitment to the implementation and continual improvement of the QMS in meeting with their stakeholders requirements/expectations based on ISO 9001:2015.

During implementation of ISO 9001:2015, the top management feels that is very useful especially for support increased corrective and preventive action, improve regulations accomplishment such as accreditation and customer satisfaction.

The QMS Policy established by Top Management and relevant with the nature of business. Copies of this QMS policies are communicated and posted at strategic area such as public area at faculties and website and all employees are understood and aware the spirit of QMS policy in relation to their jobs.

The organization had set measurable objectives in line with improving quality effectiveness and efficiency of their processes and services which aligned with their QMS policy.

The issues that still facing by organization was about resource of lectures, ratio between student and lecture approximately 1:45 and there are only two lecturers with linear knowledge with study programs, every year organization has requested new lecturer but decision for recruitment process is under control ministry of religion.

Result :

Based on sample data taken as shown by evidence above, proses in this area has been implemented as required, however there is an opportunity for improvement related to the resources

Tim Penjaminan Mutu / Gugus Kendali Mutu:

Auditee : Ms. Zila

Clause : 9.1

Objective Evidence :

1. GPMF Report Semester Ganjil 2019/2020 --> Monitored and Evaluate Study Program's Tridharma

- Tridharma Pengajaran, include :

-- Standar Proses

-- Standar Sarana dan Prasarana

-- Standar Tenaga Pengajar

-- Standar Pembiayaan

- Tridharma Penelitian, include :

-- Standar Proses

-- Standar Sarana dan Prasarana

-- Standar Tenaga Pengajar

-- Standar Pembiayaan

- Tridharma Pengabdian Masyarakat, include :

- Standar Proses
- Standar Sarana dan Prasarana
- Standar Tenaga Pengajar
- Standar Pembiayaan

2. GPMP Report

- Program Studi Komunikasi Penyiaran Islam --> Laporan Monev Semester Ganjil 2019/2020
- Program Studi Pengembangan Masyarakat Islam --> Laporan Monev Semester Ganjil 2019/2020
- Program Studi Jurnalistik --> Laporan Monev Semester Genap 2018/2019

Result :

Based on sample data taken as shown by evidence above, proses in this area has been implemented as required, however there is an opportunity for improvement related to the evaluation in the GPMF report

Kepegawaian, Sarana dan Prasarana:

Auditee : Pak Johari

Clause : 6, 7, 8, 9, 10

Objective Evidence:

1. Recruitment Guidelines : Pedoman Penerimaan dan Pengembangan Dosen UIN Raden Fatah Palembang Fakultas Dakwah dan Komunikasi bagian II (Persyaratan dan Prosedur) --> Magister untuk S1, Doctoral untuk S2, Guru Besar untuk S3

Keputusan Rector Universitas Islam Negeri Raden Fatah Palembang Nomor : 118 Tahun 2015, tentang pedoman pengelolaan sumber daya manusia

2. Evaluation of LB Lecturers : Penilaian Kinerja Dosen LB --> Monitoring dan Evaluasi by Kaprodi using Google Drive :

- Attendance as scheduled
- RPS in beginning of study
- Compliance to RPS
- Create and spread UTS and UAS material on time
- Mengoreksi dan menyerahkan nilai tepat waktu dan lengkap sesuai dengan jadwal di SIMAK
- Mendapat Feedback/penilaian positif dari mahasiswa tentang perkuliahan

3. Sample taken from 2 Dosen LB --> more than 95% conform with the requirements

4. Sample of Competence's Evidence :

I. Lecturer 1

- Lembar Disposisi 01 April 2019
- Post Graduate Certificate from University of Tridinanti Palembang no. S-20604163201021, Major study of Human Resource Management, 06 April 2016
- Academic Transcript --> Excellent

II. Lecturer 2

- Curriculum Vitae
- Post Graduate Certificate from Universitas Negeri Yogyakarta no. 05766/0212/F02/S2/2017, Major study of Education, 02 Mei 2017
- Academic Transcript --> Cum Laude

5. Sarana Prasarana --> Daftar Barang Ruangan (01 January 2019)

6. Site Visit :

- Ruang Kelas 03 --> Leaked Rooftop --> Request for reparation has been made

- Ruang Kelas 02
 - Laboratorium Terpadu (RAFA TV)
7. Surat Permohonan Perbaikan Laboratorium BPI Nomor : B-99/Un.09/V.2/Kp.02/01/2020--> 23 January 2020

Conclusion :

Based on sample data taken as shown by evidence above, proses in this area has been implemented as required, however there is an opportunity for improvement related to the documentation of Lecturer's competence evidence

Program Studi Pengembangan Masyarakat Islam:

Auditee:

Clause : 6, 7, 8, 9, 10

Objective Evidence :

1. Buku Katalog Mahasiswa Program Studi Pengembangan Masyarakat Islam tahun 2019
 - Total Courses : 65 (include skripsi dan mata kuliah pilhan) --> 154 SKS for 7 semester
2. Sample --> Kegiatan Kuliah 2019 Ganjil
 - Gender dan Keadilan Sosial (PMI 3093) : 3 SKS
 - RPS Gender dan Keadilan Sosial --> 16 meetings include UAS --> Bahan Kajian, Type of Learning (Learning, Small Group Discussion, Discovery Learning, Cooperative Learning, Test) Time, Kriteria Penilaian dan indikator, weight)
 - Daftar Nilai Mahasiswa class 1875B --> 35 Students
 - Absensi Kelas 3 September 2019 - 10 Desember 2019
 - Test Material (Soal UAS) --> Validated by Kaprodi
 - Ilmu Dakwah (PMI 3023) : 3 SKS --> Lilin Suryani, M.Pd.I
 - RPS Class 1757A --> 16 pertemuan (include UAS) --> Bahan Kajian, Type of Learning (Learning, Small Group Discussion, Discovery Learning, Cooperative Learning, Test) Time, Kriteria Penilaian dan indikator, weight)
 - Absensi Kelas 06 September 2018 to 27 November 2018
 - Daftar Nilai Mata Kuliah Mahasiswa --> 21 Students
 - Manajemen Pengembangan Masyarakat (PMI 3072) : 2 SKS --> Melsafaradila, M.pd
 - RPS Kelas 1657A --> 16 pertemuan termasuk UAS
 - Absensi Kelas --> 3 March 2019 - 7 June 2019
 - Detail Nilai Mata Kuliah MAhasiswa --> 31 Students

Conclusion :

Based on sample data taken as shown by evidence above, proses in this area has been implemented as required, however there is an opportunity for improvement related to the validation method of RPS

Prodi Komunikasi Penyiaran Islam:

Auditee : Mrs. Vivi Hasmati, Mr. Muslim, Ms. Eva

Clauses : 6,7,8,9,10

Objective Evidence:

- Kebijakan Mutu and Visi-Misi
- Renstra 2016 - 2020; IPK Minimum 3,4 ; Last graduation students on 23 December 2019 average IPK > 3,4
- Renov 2016-2020; Lulus 100% dan PKL keluar; Mou with several institution such as university islam sultan sharif ali, RRI Palembang, TVRI Sumsel and PAL TV
- Many students that was hired by industries after graduation and organization request feedback from several institution for students performance, some documents was verified:
 - > Sriwijaya Post , Irham Sughandi, Staff Periklanan
 - > RRI, Robby Pangestu, Wartawan
 - > Harian Sumatera Ekspres
- Kurikulum Prodi Komunikasi dan Penyiaran Islam (KPI) Fakultas Dakwah dan Komunikasi UIN raden Fatah Palembang 2019
- Some subject was verified:
 - a. Bahasa Inggris
 - > Sylabus Bahasa Inggris subject code UIN1062
 - > Rencana Pembelajaran Semester subject code UIN1062
 - > Daftar Hadir Dosen
 - > Daftar Hadir Mahasiswa
 - > Soal UTS
 - > Soal UAS
 - > Nilai Mata Kuliah Mahasiswa Kelas 1951C dan 1951D
 - b. Komunikasi Interpersonal
 - > Sylabus Komunikasi Interpersonal subject code KPI 3212
 - > Rencana Pembelajaran Semester Komunikasi Interpersonal subject code KPI3322
 - > Daftar hadir dosen
 - > Daftar hadir mahasiswa
 - > Soal UTS
 - > Soal UAS
 - > Nilai Mata Kuliah Mahasiswa Kelas 1851 A, 1851 B, 1851 C and 1851 D
- Evaluasi kinerja dosen
- Communication channel with students: whatsapp group, email and web KPI
- Ratio Lecture and students 1:32
- Beban Kinerja Dosen 2019

Conclusion :

Based on sample data taken as shown by evidence above, proses in this area has been implemented as required, however there is an opportunity for improvement related to the validation of soal UTS and UAS

Program Studi Jurnalistik:

Auditee : Mrs. Suryati, Mrs. Sumainah, Mrs. Elsa

Clause : 6,7,8,9,10

Objective Evidence :

- Buku pedoman Akademik Fakultas Dakwah dan Komunikasi UIN raden Fatah 2019
- Some subject was verified:
 - a. Pengantar Ilmu Komunikasi
 - > Syllabus Pengantar Ilmu Komunikasi TIK 1032
 - > Rencana Pembelajaran Semester
 - > Daftar Hadir Dosen
 - > Daftar Hadir Mahasiswa
 - > Soal UTS
 - > Soal UAS
 - > Nilai Mata Kuliah Mahasiswa Kelas 1953C dan 1953D
 - b. Teori Jurnalistik
 - > Syllabus Teori Jurnalistik subject code TIK 3112
 - > Rencana Pembelajaran Semester
 - > Daftar hadir dosen
 - > Daftar hadir mahasiswa
 - > Soal UTS
 - > Soal UAS
 - > Nilai Mata Kuliah Mahasiswa Kelas 1853 C dan 1853D
- Ratio lecture and student: 1:45
- Renstra 2015-2019
 - > Lulusan 8 semester 80% , achievement >80%
 - > IPK 3,46, achievement >3,46
- Communication channel with students: whatsapp group, email
- Beban Kinerja Dosen 2019
- Some Jurnal was verified
 - > Penerapan Jurnalisme Pembangunan dalam pemberdayaan masyarakat 2018-2019
 - > Pendampingan komunitas petani "Urban Farming" 2018-2019

Result :

Based on sample data taken as shown by evidence above, proses in this area has been implemented as required, however there is an opportunity for improvement related to the resources

Finding Reference	1878747-202001-I1	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	9.1.1
Category	Opportunity for Improvement		
Area/Process:	Tim Penjaminan Mutu / Gugus Kendali Mutu		
Details	Consider to establish detailed data presentation that could be comparable to evaluate the trend of GPMF result		

Finding Reference	1878747-202001-I2	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	9.1.3
Category	Opportunity for Improvement		
Area/Process:	Tim Penjaminan Mutu / Gugus Kendali Mutu		
Details	Consider to describe the evaluation result from management system implementation effectiveness		

Finding Reference	1878747-202001-I3	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	7.2
Category	Opportunity for Improvement		
Area/Process:	Kepegawaian, Sarana dan Prasarana		
Details	The evidence of competence from "Gender dan Keadilan Sosial (PMI 3093)" learning course not readily available in this area, due to the status of lecturer that permanently in other Faculty, however the evidence of competence are available		

Finding Reference	1878747-202001-I4	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	8.3.4
Category	Opportunity for Improvement		
Area/Process:	Program Studi Pengembangan Masyarakat Islam		
Details	Consider to use validation method that ensure all the components in the RPS or Soal UTS & UAS are appropriate		

Finding Reference	1878747-202001-I5	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	7.1.2
Category	Opportunity for Improvement		
Area/Process:	Dekan & Wakil Dekan (Top Management) & Program Studi Jurnalistik		
Details	Sumber Daya Manusia (Dosen) bidang keilmuan untuk jurusan jurnalistik masih belum optimal, sehingga perlu disesuaikan dengan rasio yang ideal dengan jumlah mahasiswa, meskipun demikian kualitas lulusan jurnalistik saat ini sudah cukup baik		

Finding Reference	1878747-202001-I6	Certificate Reference	FS 637520
Certificate Standard	ISO 9001:2015	Clause	8.3.4
Category	Opportunity for Improvement		
Area/Process:	Prodi Komunikasi Penyiaran Islam		
Details	Perlu adanya pengembangan sistem validasi untuk soal-soal UTS dan UAS yang bentuknya multimedia atau karya dari penerapan teori		

Next visit objectives, scope and criteria

The objective of the assessment is to conduct a surveillance assessment and look for positive evidence to ensure the elements of the scope of certification and the requirements of the management standard are effectively addressed by the organisation's management system and that the system is demonstrating the ability to support the achievement of statutory, regulatory and contractual requirements and the organisations specified objectives, as applicable with regard to the scope of the management standard, and to confirm the on-going achievement and applicability of the forward strategic plan.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

ISO 9001:2015

Fakultas Dakwah dan Komunikasi UIN Raden Fatah Palembang management system documentation

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organisation within 30 days of an agreed visit date.

Next Visit Plan

Date	Auditor	Time	Area/Process	Clause
XX/02/2021			Dekan (Faculty Dean)	
			Gugus Penjaminan Mutu Fakultas	
			Program Studi Bimbingan Penyuluhan Islam	
			Program Studi Pengembangan Masyarakat Islam	
			Program Studi Manajemen Dakwah	
			Laboratorium dan Perpustakaan	

Appendix: Your certification structure & ongoing assessment programme

Scope of Certification

FS 637520 (ISO 9001:2015)

The provision of education services for Program Studi Bimbingan Penyuluhan Islam, Program Studi Komunikasi dan Penyiaran Islam, Program Studi Pengembangan Masyarakat Islam, Program Studi Jurnalistik and Program Studi Manajemen Dakwah

Assessed location(s)

The audit has been performed at Central Office, Permanent Locations.

Palembang / FS 637520 (ISO 9001:2015)

Location reference	0047564372-000
Address	Fakultas Dakwah dan Komunikasi UIN Raden Fatah Palembang Jl. Prof. K.H. Zainal Abidin Fikry No. 1 km 3,5 Palembang 30126 Indonesia
Visit type	Continuing assessment (surveillance)
Assessment reference	3115069
Assessment dates	30/01/2020
Deviation from Audit Plan	No
Total number of Employees	39
Effective number of Employees	39
Scope of activities at the site	Main Certificate Scope applies.
Assessment duration	2 day(s)

Certification assessment program

Certificate Number - FS 637520

Location reference - 0047564372-000

		Audit1	Audit2	Audit3	Audit4	Audit5
Business area/Location	Date (mm/yy):	01/19	06/19	01/20	01/21	01/22
	Duration (days):	2	2	2	2	4
Dekan (Faculty Dean)		X	X	X	X	X
Gugus Penjaminan Mutu Fakultas		X	X	X	X	X
Program Studi Bimbingan Penyuluhan Islam		X			X	X
Program Studi Komunikasi Penyiaran Islam		X		X		X
Program Studi Pengembangan Masyarakat Islam			X	X	X	X
Program Studi Jurnalistik			X	X		X
Program Studi Manajemen Dakwah			X		X	X
Kepegawaian, Sarana dan Prasarana		X	X	X		X
Laboratorium dan Perpustakaan		X	X		X	X

Expected outcomes for accredited certification.

What accredited certification to ISO 9001 means

ISO 9001:2015 specifies requirements for a quality management system when an organization: needs to demonstrate its ability to consistently provide products and services that meet customer and applicable statutory and regulatory requirements; and aims to enhance customer satisfaction through the effective application of the system, including processes for improvement of the system and the assurance of conformity to customer and applicable statutory and regulatory requirements.

What accredited certification to ISO 9001 does not mean

- 1) It is important to recognize that ISO 9001 defines the requirements for an organization's quality management system, not for its products and services. Accredited certification to ISO 9001 should provide confidence in the organization's ability to "consistently provide product that meets customer and applicable statutory and regulatory requirements". It does not necessarily ensure that the organization will always achieve 100% product conformity, though this should of course be a permanent goal.
- 2) ISO 9001 accredited certification does not imply that the organization is providing a superior Product or service, or that the product or service itself is certified as meeting the requirements of an ISO (or any other) standard or specification.

Definitions of findings:

Non-conformity:

Non-fulfilment of a requirement.

Major nonconformity:

Nonconformity that affects the capability of the management system to achieve the intended results.

Nonconformities could be classified as major in the following circumstances:

- If there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements;
- A number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.

Minor nonconformity:

Nonconformity that does not affect the capability of the management system to achieve the intended results.

Opportunity for improvement:

It is a statement of fact made by an assessor during an assessment, and substantiated by objective evidence, referring to a weakness or potential deficiency in a management system which if not improved may lead to nonconformity in the future. We may provide generic information about industrial best practices but no specific solution shall be provided as a part of an opportunity for improvement.

Observation:

It is ONLY applicable for those schemes which prohibit the certification body to issue an opportunity for improvement.

It is a statement of fact made by the assessor referring to a weakness or potential deficiency in a management system which, if not improved, may lead to a nonconformity in the future.

How to contact BSI

Should you wish to speak with BSI in relation to your registration, please contact your customer service officer.

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Notes

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BSI, its staff and agents shall keep confidential all information relating to your organisation and shall not disclose any such information to any third party, except that in the public domain or required by law or relevant accreditation bodies. BSI staff, agents and accreditation bodies have signed individual confidentiality undertakings and will only receive confidential information on a 'need to know' basis.

This audit was conducted on-site through document reviews, interviews and observation of activities. The audit method used was based on sampling the organization's activities and it was aimed to evaluate the fulfilment of the audited requirements of the relevant management system standard or other normative document and confirm the conformity and effectiveness of the management system and its continued relevance and applicability for the scope of certification.

As this audit was based on a sample of the organization's activities, the findings reported do not imply to include all issues within the system.

Regulatory compliance

BSI requires to be informed of all relevant regulatory non-compliance or incidents that require notification to any regulatory authority. Acceptance of this report by the client signifies that all such issues have been disclosed as part of the assessment process and agreement that any such non-compliance or incidents occurring after this visit will be notified to BSI as soon as practical after the event.